# PCHQR Program Refresher: COVID-19 Vaccination Coverage Among Health Care Personnel Measure

## March 24, 2022

# Webbinar Questions

- Please email any questions related to the webinar topic to [WebinarQuestions@hsag.com](mailto:WebinarQuestions@hsag.com). The following information should be included:
  - Subject Line: PCHQR Program Refresher: COVID-19 Vaccination Coverage Among Health Care Personnel Measure
  - Email body: Your question along with applicable slide number
- For questions unrelated to the webinar topic, use the [QualityNet Question and Answer Tool](#).

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# Speakers

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Acronyms

# Purpose

This presentation will:

- Provide a refresher on the COVID-19 Vaccination Coverage Among Healthcare Personnel measure (COVID-19 HCP Vaccination measure).

- Show the steps to enter COVID-19 HCP Vaccination measure data into the CDC's National Healthcare Safety Network (NHSN) for the upcoming data submission deadline.

- Address frequently asked questions.

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# Objectives

PCHQR Program participants will:

- Understand the COVID-19 HCP Vaccination measure specifications.

- Apply the COVID-19 HCP Vaccination measure requirements for the PCHQR Program.

- Perform the steps to enter COVID-19 HCP Vaccination measure data into NHSN.

- Answer common questions regarding the COVID-19 HCP Vaccination measure

# Acronyms and Abbreviations

| | | | |
|---|---|---|---|
| **ASCQR** | Ambulatory Surgical Center Quality Reporting | **HCP** | Health Care Personnel |
| **CAUTI** | catheter-associated urinary tract infection | **IPFQR** | Inpatient Psychiatric Facility Quality Reporting |
| **CDC** | Centers for Disease Control and Prevention | **IPPS** | Inpatient Prospective Payment System |
| **CDI** | *Clostridium difficile* Infection | **IQR** | Inpatient Quality Reporting |
| **CLABSI** | central line-associated bloodstream infection | **LTCH PPS** | Long-Term Care Hospital Prospective Payment System |
| **CMS** | Centers for Medicare & Medicaid Services | **MRSA** | Methicillin-resistant *Staphylococcus aureus* |
| **CY** | calendar year | **NHSN** | National Healthcare Safety Network |
| **DACA** | Data Accuracy and Completeness Acknowledgement | **OCM** | Oncology Care Measures |
| **FR** | *Federal Register* | **OQR** | Outpatient Quality Reporting |
| **FY** | fiscal year | **PCHQR** | PPS-Exempt Cancer Hospital Quality Reporting |
| **HAI** | Healthcare-Associated Infection | **SSI** | surgical site infection |
| **HCAHPS** | Hospital Consumer Assessment of Healthcare Providers and Systems Survey | **PDC** | Provider Data Catalog |
| **HPS** | Healthcare Personnel Safety | **Q** | quarter |
| **HQR** | Hospital Quality Reporting | **VIQR** | Value, Incentives, and Quality Reporting |

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# COVID-19 HCP Vaccination Measure Overview

# Denominator

- The denominator is the number of healthcare personnel (HCP) eligible to work in the healthcare facility for at least one day during the reporting period, excluding persons with contraindications to the COVID-19 vaccination that are described by the CDC.

- The CDC considers a history of the following to be the only contraindications to vaccination with COVID-19 vaccines:
  - Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine
  - Immediate allergic reaction of any severity to a previous dose or known (diagnosed) allergy to a component of the COVID-19 vaccine

# Numerator

The numerator is the cumulative number of HCP eligible to work in the healthcare facility for at least one day during the reporting period and who received a completed vaccination course against COVID-19 since the date the vaccine was first available or on a repeated interval, if revaccination is recommended.

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# Numerator (continued)

A completed vaccination course may require one or more doses depending on the specific vaccine used.

- A completed course is defined as dose 1 and dose 2 of COVID-19 vaccines requiring two doses for completion or one dose of COVID-19 vaccine requiring only one dose for completion.

- Currently the measure does not include the administration of the booster vaccine.

  - o For surveillance purposes, the CDC is requiring the data entry of the number of HCP that are eligible to receive an additional dose or booster of COVID-19 vaccine. Please refer to the [Interim Clinical Considerations for Use of COVID-19 Vaccines](#) for additional information.

# HCP Categories

- All core HCP include the sum of the following:
  - Employees
  - Licensed independent practitioners
  - Adult students/trainees and
  - Volunteers
- All HCP include the sum of each category above, including other contract personnel.

# HCP Inclusions

| HCP Category | Inclusion |
|---|---|
| Employee (staff on payroll) | Include all persons receiving a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact. |
| Licensed independent practitioners (Physicians, advanced practice nurses, and physician assistants) | Include physicians (MD, DO); advanced practice nurses; and physician assistants only who are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this category. |
| Adult students/trainees and volunteers | Include medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older that are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. |
| Other Contract Personnel | Defined as persons providing care, treatment, or services at the facility through a contract who do not meet the definition of any other required denominator category. This includes agency and/or PRN staff who are scheduled to work at the facility at least once per week. |

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# COVID-19 HCP Vaccination Measure
# PCHQR Program Requirements

# FY 2022 IPPS/LTCH PPS Final Rule

- In the Fiscal Year (FY) 2022 Inpatient Prospective Payment System (IPPS)/Long-Term Care Hospital Prospective Payment System (LTCH PPS) Final Rule (86 FR 45428–45434), CMS finalized the reporting of the COVID-19 HCP Vaccination measure for the PCHQR Program, as well as these quality reporting programs and additional post-acute care settings:
  - Hospital Inpatient Quality Reporting (IQR)
  - Inpatient Psychiatric Facility Quality Reporting (IPFQR)
- CMS also finalized this measure for inclusion in the Hospital Outpatient Quality Reporting (OQR) Program and the Ambulatory Surgical Center Quality Reporting (ASCQR) Program.

# Reporting Requirements

- PCHs will collect the numerator and denominator for the COVID-19 HCP Vaccination measure for at least one self-selected week during the month of the reporting quarter and submit to NHSN before the quarterly deadline.

  o Each quarter, the CDC will calculate a single quarterly COVID-19 HCP Vaccination coverage rate for each PCH by taking the average of the data from the three weekly rates.

  o CMS will publicly report each quarterly COVID-19 HCP Vaccination coverage rate as calculated by the CDC.

- For the FY 2023 program year, the reporting period will be October 1, 2021–December 31, 2021.

- Beginning with FY 2024 program year and subsequent years, data will be submitted quarterly following reporting deadlines for the PCHQR Program.

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# Data Submission

- CMS and the CDC encourage weekly reporting of the data.
- Hospitals will only be required to submit by the quarterly submission deadline.
  - For example, for the quarter (Q)4 2021 reporting period, hospitals will be required to submit all three months of data by the May 16, 2022, submission deadline.
  - The hospital meets submission requirements if the CDC can calculate a quarterly rate.
- CMS typically allows 4.5 months for hospitals to add new data and submit, resubmit, change, and delete existing data up until the submission deadline.
  - Data should be submitted well before the deadline to allow time to review the data for accuracy and make necessary corrections.
- Data can be modified in NHSN at any time; if modified in NHSN after the submission deadline, data are **<u>not</u>** sent to CMS nor used in CMS programs.

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# Submission Deadlines for PCHQR Program

## Calendar Years (CYs) 2021 and 2022

| Event Dates | Reporting Period | Submission Deadline |
|---|---|---|
| Q4 2021 | Oct 1–Dec 31 | May 16, 2022 |
| Q1 2022 | Jan 1–Mar 31 | August 15, 2022 |
| Q2 2022 | Apr 1–Jun 30 | November 15, 2022 |
| Q3 2022 | Jul 1–Sep 30 | February 15, 2023 |
| Q4 2022 | Oct 1–Dec 31 | May 15, 2023 |

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# PCHQR Measure Submission Deadlines by Due Date

[QualityNet – PCHQR Program Resources Page](#)

| Due Date | CLABSI/CAUTI/ SSI/MRSA/CDI* | Flu HCP Vac* | COVID-19 HCP Vac* | HCAHPS | OCM†‡ (PCH-15 only) | DACA |
|---|---|---|---|---|---|---|
| 11/15/2021 | Q2 2021** (4/1–6/30) | N/A | N/A | N/A | N/A | N/A |
| 01/05/2022 | N/A | N/A | N/A | Q3 2021** (7/1–9/30) | N/A | N/A |
| 02/15/2022 | Q3 2021** (7/1–9/30) | N/A | N/A | N/A | N/A | N/A |
| 04/06/2022 | N/A | N/A | N/A | Q4 2021 (10/1–12/31) | N/A | N/A |
| 05/16/2022 | Q4 2021 (10/1–12/31) | Q4 2021–Q1 2022 (10/1/21–3/31/22) | Q4 2021 (10/1–12/31) | N/A | N/A | N/A |
| 07/06/2022 β | N/A | N/A | N/A | Q1 2022 (1/1–3/31) | N/A | N/A |
| 08/15/2022 | Q1 2022 (1/1–3/31) | N/A | Q1 2022 (1/1–3/31) | N/A | CY 2021** (1/1–12/31) | N/A |
| 08/31/2022 | N/A | N/A | N/A | N/A | N/A | For FY 2023 |
| 10/05/2022 β | N/A | N/A | N/A | Q2 2022 (4/1–6/30) | N/A | N/A |
| 11/15/2022 | Q2 2022 (4/1–6/30) | N/A | Q2 2022 (4/1–6/30) | N/A | N/A | N/A |

# Reporting

Each quarter, the CDC will calculate a single quarterly COVID-19 HCP Vaccination coverage rate for each facility, by taking the average of the data from the three weekly rates submitted by the facility for that quarter.

- If more than one week of data is submitted for the month, for measure calculation purposes, the most recent week of the month will be used.

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# Public Reporting

- Public reporting will begin with the October 2022 release using data collected from Q4 2021 (October 1, 2021–December 31, 2021).

- CMS will not publicly report data averaged over four rolling quarters.

  - o CMS will only report the most recent quarter of data, which we believe results in more meaningful, up-to-date information.

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## COVID-19 HCP Vaccination Measure in NHSN

# Getting Started in NHSN

Enrolling in NHSN
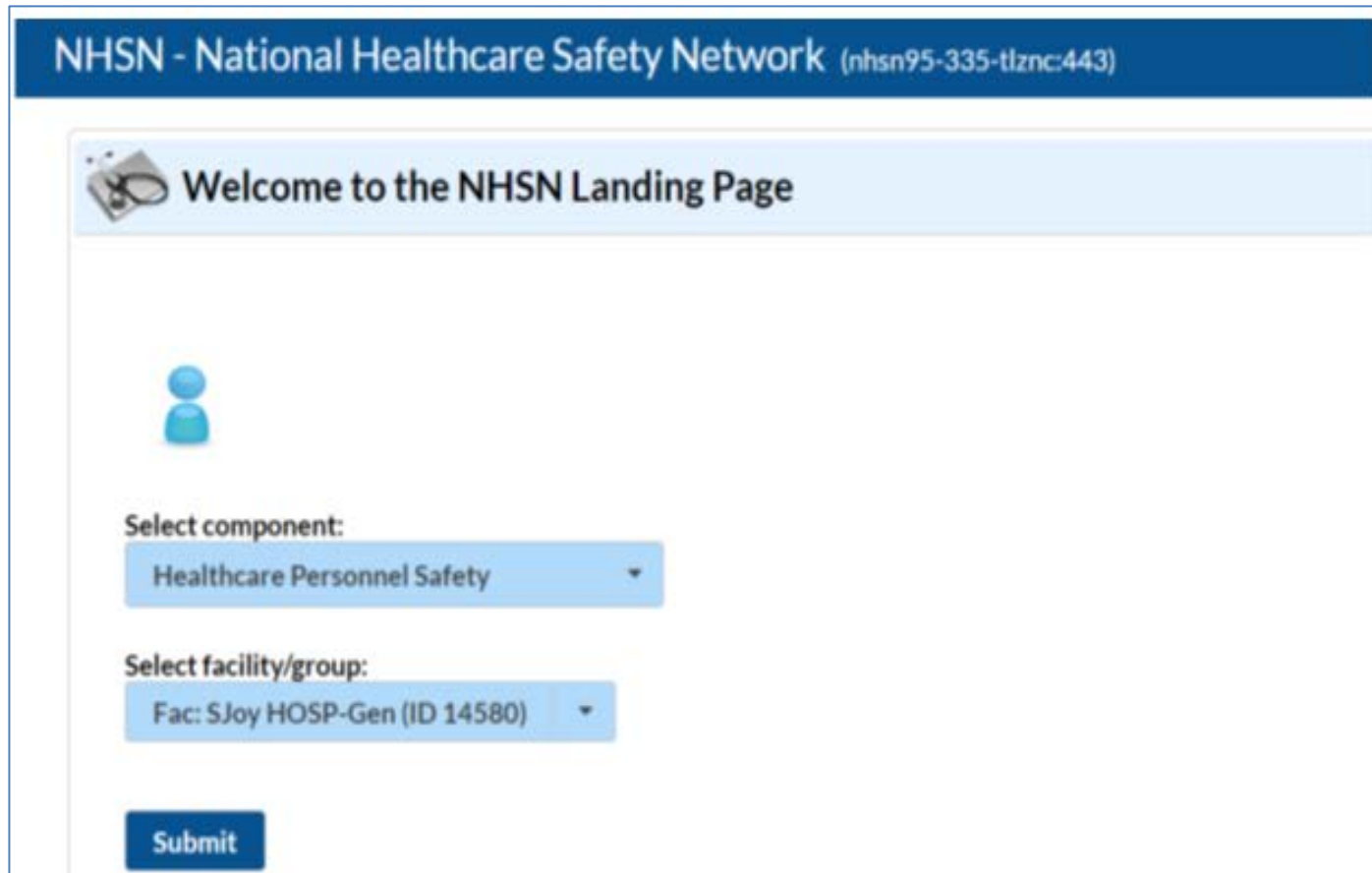
- Participating facilities must be enrolled in NHSN.
  - This usually takes at least 4–6 weeks.
  - During the enrollment process, facilities may choose to participate in any of the NHSN components.
  - http://www.cdc.gov/nhsn/enrollment/index.html

Activating the HPS Component

- Facilities enrolled in NHSN that will be participating in the HPS component must activate the component in NHSN.
- https://www.cdc.gov/nhsn/hps/index.html

# NHSN Landing Page

Select the Healthcare Personnel Safety (HPS) Component.

# HPS Home Page

- Select Vaccination Summary on the left-hand navigation bar.
- Select COVID-19 Weekly Vaccination Summary.

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# Calendar Week

Click on the week you wish to enter data.

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# Monthly Reporting Plan

- The plan collects data on which modules and months the facility plans to participate.

- The plan must be completed before entering data for that month.

# Five Key Required Questions for Weekly Vaccination Reporting

1. What is the number of current HCPs?

2. What number of these HCP have **ever been** vaccinated (cumulative number vaccinated) with the COVID-19 vaccine?

3. What number of these HCPs have other conditions?

4. What is the number of HCP who have received a complete COVID-19 vaccine series **and** who are **eligible** to receive an **additional dose or booster**?

5. What is the number of HCP in Question 4 who have received an additional vaccine dose or booster since August 2021?

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# Vaccination Summary Data

- Complete the required fields.
- Red asterisks indicate questions that must be completed.
- Use the tab key on a computer keyboard to move across columns.
- Enter 0 if no HCP are reported for a required field.

# Denominator and Numerator Category Definitions

Review the Table of Instructions
before collecting and entering data:
https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html

| Data Fields | Instructions for Completion |
|---|---|
| **All Core HCP** | This number is the sum of employees (staff on facility payroll), licensed independent practitioners (physicians, advanced practice nurses, & physician assistants) and adult students/trainees & volunteers. This field is auto-populated by NHSN. |
| **All HCP** | This number is the sum of employees (staff on facility payroll), licensed independent practitioners (physicians, advanced practice nurses, & physician assistants), adult students/trainees & volunteers, and other contract personnel. This field is auto-populated by NHSN. |
| **Employee HCP** (Staff on facility payroll) | *Required.* Defined as all persons receiving a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact. |
| **Non-Employee HCP** (Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants) | *Required.* Defined as physicians (MD, DO); advanced practice nurses; and physician assistants only who are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this |

# Saving HCP COVID-19 Vaccination Measure Data

Click on the Save button at the bottom of the screen after entering data.

Reminder for reporting to Vaccine Adverse Event Reporting System (VAERS)

Please note that clinically significant adverse events following COVID-19 vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) at https://vaers.hhs.gov/reportevent.html. To help identify reports from NHSN sites, please enter your NHSN orgID in Box 26 of the VAERS form.

Clinically significant adverse events include vaccine administration errors and serious adverse events (such as death, life-threatening conditions, or inpatient hospitalization) that occur after vaccination, even if it is not certain that vaccination caused the event.

Other clinically significant adverse events may be described in the provider emergency use authorization (EUA) fact sheets or prescribing information for the COVID-19 vaccine(s). Healthcare providers should comply with VAERS reporting requirements described in EUAs or prescribing information.

Save     Cancel

# Tracking Worksheet

- This optional tool is in an Excel spreadsheet format.
- This tool auto-calculates answers to the vaccination data collection form: https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html

| Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Non-Long-Term Care Facilities | | | | | *Facility ID#: | | | |
|---|---|---|---|---|---|---|---|---|
| | | | | | Vaccination type: | | COVID_19 | |
| | | | | | *First day of Reporting Week (Monday): | | 8/2/2021 | |
| TRACKING WORKSHEET | | | | | Last day of the reporting week (Sunday): | | 8/8/2021 | |
| *HCP Start of Employment Date (Enter Date) | HCP End of Employment Date (Enter Date) | HCP Last Name (Enter name) | HCP First Name (Enter name) | Unique HCP Identifier (Enter DOB, License #, etc.) | *Vaccinated with Dose 1 (Enter date of vaccination 1) | *Dose 1 Vaccine Manufacturer Name (choose from drop-down) | *Vaccinated with Dose 2 (Enter date of vaccination 2) | *Dose 2 Vaccine Manufacturer Name (choose from drop-down) |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

READ THIS - Instructions   **TrackingWorksheet**   ReportingSummary   ⊕

# NHSN Analysis and Reporting

- Use the Analysis tool within NHSN to generate summary reports for facility data.

- Reports are in two folders:
  - COVID-19 Vaccination holds data after the September 2021 NHSN update.
  - COVID-19 Vaccination (Pre-10.0) holds data before the September 2021 NHSN update.
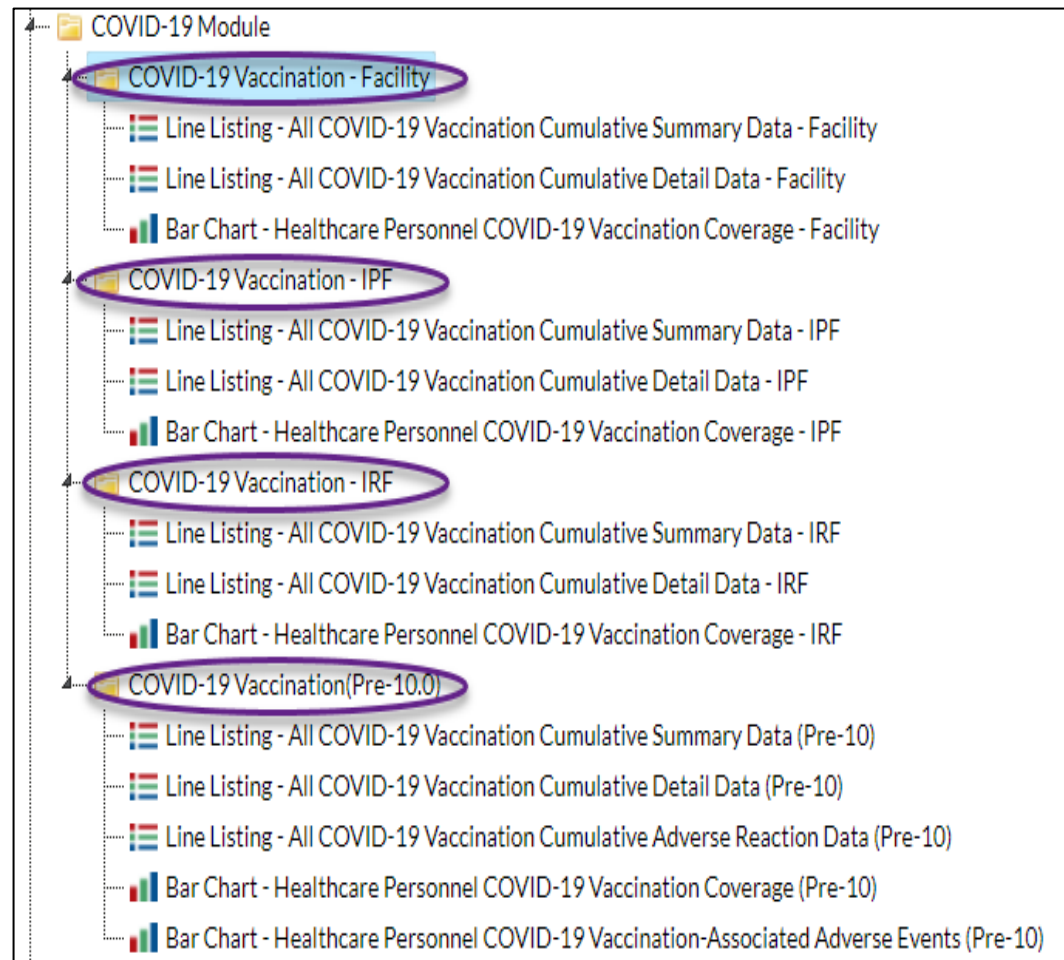
# NHSN Resources

Training materials include the following:

- Data collection forms
- Tables of instructions
- Tracking worksheets
- Training slides
- Analysis and reporting guides
- .CSV file resources



https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html

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# NHSN Questions

- User support: [nhsn@cdc.gov](mailto:nhsn@cdc.gov)
  - Write *Weekly COVID-19 Vaccination* in the subject line of the e-mail.
- For more information:
  - 1-800-CDC-INFO (232-4636)
  - TTY:  1-888-232-6348
  - [www.cdc.gov](http://www.cdc.gov)

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# Frequently Asked Questions

# Denominator and Numerator

**Question: For employees that have a religious exemption for the vaccine, will hospitals be penalized since it is entered as declined?**

Answer: Facilities should report COVID-19 vaccination summary data through NHSN per CDC guidance. For CMS, if the CDC can calculate a quarterly rate and submit it to CMS, then the facility will meet the reporting requirements and would not be subject to any penalties.

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# Healthcare Personnel (HCP) Categories

**Question: Is there any guidance for who qualifies as "HCP" versus "Non-HCP"?**

Answer: HCP are included regardless of clinical responsibility or patient contact. Refer to the [Instructions for Completion of the Weekly HCP COVID-19 Vaccination Cumulative Summary](#) for further guidance.

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# Reporting Requirements

**Question: How long will weekly reporting continue?**

Answer: For CMS, the requirement to report at least one week per month of the HCP COVID-19 Vaccination measure will continue until further notice. Any substantive changes to the measure or removal of the measure would be proposed in future rule making.

**Question: Is it a federal requirement to report HCP COVID-19 Vaccination measure data via NHSN to pass the reporting of the measure?**

Answer: Yes, in the FY 2022 IPPS/LTCH PPS Final Rule, CMS finalized that hospitals would collect the numerator and denominator for the HCP COVID-19 Vaccination measure for at least one self-selected week during each month of the reporting quarter and submit the data to the NHSN HPS Component before the CMS quarterly deadline to meet quality reporting program requirements.

# Data Submission

**Question: What is the submission deadline? Are we required to report one week a month?**

Answer: The submission of the HCP COVID-19 Vaccination measure follows the same submission timeline as the other healthcare-associated infection (HAI) measures. The deadline for submitting Q4 2021 data is May 16, 2022.

# CMS Reporting

**Question: Will CMS pull data out of NHSN, or will hospitals enter denominator and numerator data manually into the *Hospital Quality Reporting (HQR) Secure Portal*?**

Answer: The CDC transmits data to CMS periodically during the submission period and immediately following the CMS quarterly submission deadline.

# CMS Reports and Public Reporting

**Question: Will the COVID-19 vaccination metrics be publicly reported?**

Answer: With the adoption of this new measure, public reporting will begin with the October 2022 Provider Data Catalog (PDC), or as soon as technically feasible, using data collected from Q4 2021 (October 1, 2021–December 31, 2021).  We will only report the most recent quarter of data in each refresh. We will not add one additional quarter of data during each advancing refresh (i.e., each refresh will not display four rolling quarters of data).

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# Calendar Week, Monthly Reporting Plan, and Reporting

**Question: Why does the CDC request weekly data if they are only going to use the most recent week submitted/reported?**

Answer: Facilities are encouraged to report HCP COVID-19 vaccination summary counts on a weekly basis so data can be used to inform COVID-19 vaccination activities at the facility and to monitor national trends for public health surveillance purposes.

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# NHSN Data Entry

**Question: Will there be a CMS report in NHSN that will reflect what is sent to CMS for the HCP COVID-19 Vaccination measure?**

Answer: Facilities can generate data reports using the NHSN analysis and reporting functions. It is recommended to allow ample time before the submission deadline to review and, if necessary, correct your HCP data. Data that are modified in NHSN after the CMS submission deadline are not sent to CMS and will not be publicly reported.

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# QualityNet Resources

[PCHQR Program Resources](#)

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# Accessing the QualityNet Questions and Answers Tool

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# Ask a Question

# Submit a Question

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# Closing Remarks

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